in this regards, have been proposed for the States of Punjab and Rajasthan.

(b) Does not arise.

(c) Does not arise.

Luring Foreign Patients for Treatment in **India**

963. SHRI RAJKUMAR DHOOT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are considering evolving an integrated policy for attracting patients including (NRI) from affluent countries to avail of cost affective, competent medical (hospitalization) services in India; and

(b) if so, since coordination amongst Ministries of Health, Civil Aviation and Tourism etc. is involved, whether Government propose to designate Ministry of Overseas Indian Affairs as the Nodal point for evolving the policy?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) The task force set up with a view to promoting India as a Health Destination for persons across the glove has been entrusted with issues relating to making available specific types of health facilities including super-speciality medical care, out-sourcing of medical services, traditional medicine expertise available etc. Identification of the list of hospitals/ institutions having standard facilities has also been entrusted to the Task Force.

(b) Presently, no such proposal is under consideration.

Transfer of Population Commission

964. SHRI KARNENDU BHATTACHARJEE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have any programme for the stabilization of population in the country through voluntary basis;

(b) if so, the details of the programme;

(c) whether Government have sought the reaction of the State Governments on this issue;

(d) if not, the reasons therefor; and

(e) whether Government propose to transfer the National Population Commission from the Planning Commission to Department of Family Welfare, if so, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKALAKSHMI): (a) and (b) Yes, Sir. The Family Welfare Programme in India is voluntary in nature, which enables couples to adopt the family planning methods, best suited to them, according to their own choice, without any compulsion. The Reproductive and Child Health (RCH) Programme is the flagship programme of the Government which addresses the issues of contraception, maternal and child health simultaneously.

(c) Yes, Sir.

(d) Does not arise.

(e) Yes, Sir. The transfer of the National Commission on Population (NCP) from the Planning Commission to the Department of Family Welfare would aviod duplication of funding and interventions for similar activities. It would also ensure improved coordination of planning and implementation between health and family welfare on one hand, and with the schemes of the related Departments on the other hand.

Development of HIV-I vaccine

965. SHRI KARNENDU BHATTACHARJEE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a research team in AIIMS had developed a vaccine for the DNA of HIV-I;

(b) if so, its efficiency on human clinical trials; and

(c) its efficiency over other available HIV vaccines?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKALAKSHMI): (a) Department of Biotechnology is supporting National Reference Centre at All India Institute of Medical Sciences (AIIMS) for developing HIV vaccine. They have reported to have developed DNA re-combinant vaccine against HIV-I sub-type 'C.